

<p><i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></p> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2009</h3>		<p><b>Complete if Known</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Application Number</td><td>10/550,002-Conf. #1240</td></tr> <tr><td>Filing Date</td><td>September 23, 2005</td></tr> <tr><td>First Named Inventor</td><td>Mugihei IKEMIZU</td></tr> <tr><td>Examiner Name</td><td>D. G. Cormier</td></tr> <tr><td>Art Unit</td><td>4132</td></tr> <tr><td>Attorney Docket No.</td><td>2936-0249PUS1</td></tr> </table>		Application Number	10/550,002-Conf. #1240	Filing Date	September 23, 2005	First Named Inventor	Mugihei IKEMIZU	Examiner Name	D. G. Cormier	Art Unit	4132	Attorney Docket No.	2936-0249PUS1
Application Number	10/550,002-Conf. #1240														
Filing Date	September 23, 2005														
First Named Inventor	Mugihei IKEMIZU														
Examiner Name	D. G. Cormier														
Art Unit	4132														
Attorney Docket No.	2936-0249PUS1														
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
<b>TOTAL AMOUNT OF PAYMENT</b> (\$)    940.00															

  

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

  

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	
							<u>Small Entity</u>
							<u>Fee (\$)</u>
							<u>Fee (\$)</u>
<b>2. EXCESS CLAIM FEES</b>							
<u>Fee Description</u>							
Each claim over 20 (including Reissues)							52      26
Each independent claim over 3 (including Reissues)							220      110
Multiple dependent claims							390      195
<u>Total Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>	
- 20 or HP		x		=			
HP = highest number of total claims paid for, if greater than 20.							
<u>Indep. Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>	
- 3 or HP		x		=			
HP = highest number of independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>		<u>Extra Sheets</u>		<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>	
- 100 =		/50 =		(round up to a whole number) x		=	
							<u>Fees Paid (\$)</u>
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...							810.00
1251 Extension for response within first month							130.00

  

<b>SUBMITTED BY</b>			
Signature	 (Reg # 46,414)	Registration No.	39,491
Name (Print/Type)	Michael R. Cammarata	Telephone	(703) 205-8000
		Date	July 23, 2009